County of the Isle of Wight.

REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1927.

ISLE OF WIGHT:
J. ARTHUR DIXON, PRINTER AND BOOKBINDER,
THE SQUARE, SHANKLIN.

Report on the Health of the Isle of Wight

FOR THE YEAR 1927.

To the Chairman and Members of the Public Health and Housing Committee of the Isle of Wight County Council.

Gentlemen,

This report is a short one because the various health services of the Council were fully described in the report for 1925 and in order to avoid repetition many matters are not referred to as there are no changes to record.

The health of the Island continues satisfactory although in 1927 the deaths outnumbered the births for the first time. This is the result of the steadily falling birthrate and the rise in the average age of the population. The infantile mortality rate and the tuberculosis death rate remain low.

There has been a noticeable growth of public interest in health matters in recent years and if this results in a more general observance of the laws of health, both the individual and the public health should benefit.

I have the honour to be, Gentlemen,
Your obedient servant,
J. FAIRLEY.

County Hall,
Newport, I.W.,
May, 1928.

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Throughout this Report figures in brackets refer to the previous year.

NATURAL AND SOCIAL CONDITIONS.

The Isle of Wight attracts many visitors in search of health or on holiday, and catering for these visitors affords employment to many householders. Agriculture and ship and yacht building are the main occupations. There are no conditions of occupation or environment which have a prejudicial effect on health.

NUMBER OF INSURED PERSONS.

The numbers of insured persons in the Isle of Wight County Insurance Committee's Register in 1927 averaged 28,530 against 27,858 in 1926 and 27,402 in 1925.

POOR LAW RELIEF.

Mr. Harrison, Clerk to the Guardians, has kindly supplied the following figures shewing the number of persons in receipt of poor relief in the Isle of Wight in December in each of the following years:

Year	Indoor	Outdoor	Total
1921	384	1808	2192
1922	376	1557	1933
1923	372	1423	1795
1924	366	1118	1484
1925	356	1344	1700
1926	394	990	1384
1927	371	801	1172

TABLE I.—GENERAL STATISTICS.

Sanitary Authority.	Medical Officer of Health.	Area in Acres 1921 Census	Population at 1921 Census.	Registrar General's Estimate of Population for 1927.	Structurally Separate Dwellings occupied at 1921 Census.	Number of Families or Seperate Occupiers 1921 Census.	Assessable Value March, 1928	Produce of 1d in the £ on Assessable Value March 1928
I.W Rural Dist.*	Dr. W. S. Wallace 1	86925	30910	29300† 28610§	6785	6878	170222	709
Cowes U.D.* ...	Dr. W. S. Wallace ...	586	9995	10460	2390	2571	57867	241
East Cowes U.D.	Dr. W. S. Wallace ...	604	4642	4566	1143	1168	21632	90
Newport M.B....	Dr. W. S. Wallace ...	504	11031	11400	2653	2762	53675	224
Ryde M.B. ...	Dr. L. Firman-Edwards	820	11294	10570	2735	2901	75390	314
St. Helens U.D.	Dr. Hayward Carpenter 1	1941	5706	5091	1269	1371	33394	139
Sandown U.D.	Dr. Hayward Carpenter	1223	7661	5499	1290	1290	44433	185
Shanklin U.D....	Dr. J. Cowper	798	7368	4188	1006	1085	45589	189
Ventnor U.D. ...	Dr. R. T. Cooke ...	745	6059	5016	1238	1282	40487	168
Whole County...	... ...	94146	94666	86090† 85400§	20509	21308	£542689	£2259

*Since the publication of the 1921 Census figures a portion of the Rural District (approximately 675 acres with a population of 893) has been transferred to the Urban District of Cowes.

†Estimated population for the purpose of calculating the birth rate

§ ,, ,, ,, ,, ,, death rate.

1 Dr. W. S. Wallace and Dr. J. H. Carpenter are also Assistant County Medical Officers.

VITAL STATISTICS.

Table II.—Vital Statistics of all Districts.

Area.	Rural District	Cowes	East Cowes	Newport	Ryde	St. Helens	Sandown	Shanklin	Ventnor	Whole County	England & Wales: Rate per 1,000
Birth-rate per 1000	13.1	12.8	12.5	15 0	13.3	14.7	11.7	9.5	11.4	13.1	16.7
Total No. of Births	385	134	57	171	141	75	64	40	57	1124	
Males	186	65	23	85	71	35	28	21	23	537	
Females	199	69	34	86	70	40	36	19	34	587	
Legitimate : Males ..	178	63	23	79	64	35	28	19	20	509	
Females ...	191	66	33	81	67	39	33	19	31	560	
Illegitimate : Males ...	8	2	0	6	7	0	0	2	3	28	
Females ...	8	3	1	5	3	1	3	0	3	27	
Total No. of Deaths ...	364	128	55	137	150	79	85	80	77	1155	
Males ...	190	68	50	62	70	35	36	36	28	555	
Females ...	174	60	25	75	80	44	49	44	49	600	
Death-rate per 1,000... ...	12.7	12.2	12.0	12.0	14.2	15.5	15.5	19.1	15.4	13.5	12.3
Deaths of Infants under 1 year of age per 1,000 Births: ...	49.4	67.2	122.8	35.1	14.2	66.7	15.6	25.0	17.5	45.4	69.0
Total Infant Deaths ...	19	9	7	6	2	5	1	1	1	51	
No of Deaths of Legitimate: Males ...	10	3	5	3	1	2	0	1	1	26	
Females ...	7	6	1	3	1	3	1	0	0	22	
No. of Deaths of Illegitimate: Males ...	0	0	1	0	0	0	0	0	0	1	
Females ...	2	0	0	0	0	0	0	0	0	2	
Number of Women dying in, or in consequence of child birth.											
From Sepsis	1	0	0	0	0	2	0	0	0	3	
From other causes ..	0	0	0	1	1	0	0	0	0	2	
Deaths from Measles (all ages)	1	0	0	0	0	0	0	0	0	1	0.09
Deaths from Whooping Cough (all ages)	2	0	2	0	0	0	1	0	0	5	0.09
Deaths from Diarrhœa (under 2 years of age)	0	0	1	2	1	1	0	0	0	5	6.3
Population— Registrar-General's estimate	29300† 28610‡	10460	4566	11400	10570	5091	5499	4188	5016	86090† 85400‡	

† Estimated population for the purpose of calculating the birth rate.

‡ ,, ,, ,, ,, ,, ,, death rate.

1927 is the first year of which we have record in which the number of deaths exceeded the number of births, the excess of deaths being 31 which gives a natural decrease of population of 0.36 per 1000. It is obvious that with a steadily falling birth rate the death rate per 1000 of the population will increase and a time will arrive when the deaths outnumber the births. This will naturally follow from the rise in the average age of the population and does not necessarily mean that conditions are less healthy. Last year the Island death rate was 13.5 compared with 12.9 in 1926, and in England and Wales also there was an increase to 12.3 from 11.6 in the previous year. The greater number of deaths in the Island per 1000 population compared with the country as a whole is accounted for by the relatively higher age of the Island population. There was exactly the same number of deaths on the Island under the age of 65 years as in the previous year, but there were 39 more deaths of persons over 65 years which now form 59.3 per cent of our total deaths. As compared with 1926 there were increases in the deaths from influenza of 48, from cerebral haemorrhage of 7 and from heart disease of 25; on the the other hand there were decreases of 11 in the deaths from tuberculosis and of 39 from cancer.

1124 is the smallest number of births recorded in any year and gives a birth rate of 13.1 per 1000, and it will be observed that 50 more girls were born than boys. This is the first year since 1919 that the baby boys have been outnumbered. 51 infants died before reaching the age of 1 year (45 in 1926) representing an infant mortality rate of 45.4 per 1000 births (39.4 in 1926). In England and Wales the infant mortality rate was 69. The increase in the number of infants' deaths was due to the greater prevalence of the common infectious diseases (See section on Infant Welfare).

TABLE III—CAUSES OF DEATH IN THE ADMINISTRATIVE COUNTY DURING THE YEAR 1927, RELATING TO CIVILIANS ONLY, AT DIFFERENT PERIODS OF LIFE

	Causes of Death.	All Ages	0	1	2 to 4	5 to 14	15 to 24	25 to 44	45 to 64	65 to 74	75 & over
	All Causes	1155	51	13	13	18	35	81	259	264	421
1	Enteric Fever	1	0	0	0	0	0	0	1	0	0
2	Small-pox	0	0	0	0	0	0	0	0	0	0
3	Measles	1	1	0	0	0	0	0	0	0	0
4	Scarlet Fever	1	0	0	0	0	0	1	0	0	0
5	Whooping Cough	5	4	0	1	0	0	0	0	0	0
6	Diphtheria	2	0	0	0	2	0	0	0	0	0
7	Influenza	75	6	2	1	2	1	6	16	16	25
8	Encephalitis Lethargica	3	0	0	0	0	1	0	1	1	0
9	Meningococcal Meningitis	5	1	0	1	2	1	0	0	0	0
10	Tuberculosis of Respiratory System	47	0	0	0	0	9	18	14	5	1
11	Other Tuberculous Diseases... ...	18	0	3	1	3	3	5	2	1	0
12	Cancer, Malignant Disease	136	0	0	0	0	1	9	46	48	32
13	Rheumatic Fever	2	0	0	0	0	0	1	0	0	1
14	Diabetes	10	0	0	0	1	0	0	3	2	4
15	Cerebral Hæmorrhage, &c.	87	0	0	0	0	0	2	21	21	43
16	Heart Disease	211	0	0	1	0	1	3	45	67	94
17	Arterio-sclerosis	45	0	0	0	0	0	0	14	12	19
18	Bronchitis	66	2	0	0	1	0	0	5	10	48
19	Pneumonia (all forms)	48	6	5	3	1	2	6	7	7	11
20	Other Respiratory Diseases	12	0	0	0	0	0	0	4	3	5
21	Ulcer of Stomach or Duodenum ...	11	0	0	0	0	0	2	5	3	1
22	Diarrhœa, &c....	6	3	2	0	1	0	0	0	0	0
23	Appendicitis and Typhlitis	7	0	0	1	1	0	1	4	0	0
24	Cirrhosis of Liver	4	0	0	0	0	0	0	3	1	0
25	Acute and Chronic Nephritis ...	51	0	0	0	1	1	2	13	20	14
26	Puerperal Sepsis	3	0	0	0	0	0	2	1	0	0
27	Other Accidents and Diseases of Pregnancy and Parturition ...	2	0	0	0	0	1	1	0	0	0
28	Congenital Debility and Malformation, Premature Birth	25	24	0	1	0	0	0	0	0	0
29	Suicide	13	0	0	0	0	5	1	6	1	0
30	Other Deaths from Violence ...	23	1	1	1	1	4	5	2	3	5
31	Other Defined Diseases	233	3	0	2	2	5	16	45	42	118
32	Causes Ill-defined or Unknown ...	2	0	0	0	0	0	0	1	1	0

TABLE IV.—CAUSES OF DEATH IN THE DISTRICTS DURING THE YEAR 1927 RELATING TO CIVILIANS ONLY, AT ALL AGES.

	Causes of Death.	Isle of Wight Rural	Cowes	East Cowes	Newport	Ryde	St. Helens	Sandown	Shanklin	Ventnor	TOTALS.
	All Causes	364	128	55	137	150	79	85	80	77	1155
1	Enteric Fever	1	0	0	0	0	0	0	0	0	1
2	Small-pox	0	0	0	0	0	0	0	0	0	0
3	Measles	1	0	0	0	0	0	0	0	0	1
4	Scarlet Fever	0	0	0	0	0	0	0	0	1	1
5	Whooping Cough	2	0	2	0	0	0	1	0	0	5
6	Diphtheria	0	2	0	0	0	0	0	0	0	2
7	Influenza	28	9	2	9	7	4	8	1	7	75
8	Encephalitis Lethargica ...	0	0	0	1	1	0	1	0	0	3
9	Meningococcal Meningitis ...	2	0	1	2	0	0	0	0	0	5
10	Tuberculosis of Respiratory System	11	10	3	4	9	3	1	3	3	47
11	Other Tuberculous Diseases	5	3	1	4	3	0	0	0	2	18
12	Cancer, Malignant Disease	39	18	7	12	20	7	14	14	5	136
13	Rheumatic Fever	1	1	0	0	0	0	0	0	0	2
14	Diabetes	2	1	0	1	3	0	2	0	1	10
15	Cerebral Hæmorrhage, &c. ...	26	6	8	8	12	5	7	8	7	87
16	Heart Disease	73	18	8	21	25	18	11	20	17	211
17	Arterio-sclerosis	10	4	0	7	7	4	3	6	4	45
18	Bronchitis	22	7	1	9	9	7	4	2	5	66
19	Pneumonia (all forms) ...	15	8	2	7	4	5	3	2	2	48
20	Other Respiratory Diseases	3	0	1	1	3	0	0	2	2	12
21	Ulcer of stomach or duodenum	3	1	0	1	1	1	2	2	0	11
22	Diarrhœa, etc. (under 2 yrs.)	0	0	1	2	1	1	0	0	0	5
23	Appendicitis and Typhlitis...	2	0	0	1	1	0	2	0	1	7
24	Cirrhosis of Liver	1	1	0	0	1	0	0	1	0	4
25	Acute and Chronic Nephritis	19	10	1	5	5	4	5	1	1	51
26	Puerperal Sepsis	1	0	0	0	0	2	0	0	0	3
27	Other Accidents and Diseases of pregnancy and parturition	0	0	0	1	1	0	0	0	0	2
28	Congenital debility and malformation, premature birth	9	4	3	2	1	3	1	1	1	25
29	Suicide	3	0	1	3	1	1	1	2	1	13
30	Other deaths from violence	10	1	0	3	3	1	2	1	2	23
31	Other defined diseases ...	74	24	13	33	32	13	17	14	14	234
32	Causes ill-defined or unknown	1	0	0	0	0	0	0	0	1	2

GENERAL PROVISION OF HEALTH SERVICES.

Reference may be made to last year's annual report and to the survey report for 1925 in which are described the health services of the County. The only modifications to be noted are these:—

STAFF.

The Nursing Staff engaged in health visiting duties for the County Council now numbers 22 as follows:—1 County Superintendent, 1 whole time nurse, and part of the time of 20 nurses of whom 18 are employed by District Nursing Associations; 1 is employed by a Maternity and Infant Welfare Association and 1 is in private practice.

REGISTRATION OF MATERNITY HOMES.

Under part II. of the Midwives and Maternity Homes Act, 1926, which came into operation at the beginning of 1927, 10 Maternity Homes were registered before the end of the year representing 49 beds, and exemption from registration was granted to 6 institutions. No other applications for registration or for exemption were received and in no case was registration or exemption refused or cancelled.

BLIND PERSONS' ACT, 1920.

There were 114 registered blind persons in the Island at the end of 1927 of whom 2 were under school age and 4 were between 5 and 16 years of age (these are sent to special schools for the blind by the Education Committee). 25 were between 16 and 50 years and 85 over 50. The Isle of Wight Society for the benefit of the indigent blind, works in conjunction with the County Council's Scheme and undertakes the supervision of these blind persons. A home visitor is employed who teaches Braile and pastime occupations to the unemployable blind, and the Society grants pensions and other help to those in need. At the end of the year49 persons were receiving pensions.

PUBLIC EDUCATION IN HEALTH.

The increased interest of the public in health matters has led to requests for lectures by the Staff, and as far as possible these requests have been met. The Women's Institutes particularly have taken a keen interest in such subjects as "Home hygene," "The Health of the child," "Food and food values," and "The care of the teeth." 13 lectures on these and similar subjects were given to various Women's Institutes alone during 1927. These were well attended and were often followed by interesting discussions.

In this connection also mention should be made of a special report issued in October on the instructions of your Committee on the health activities of the Council. This outline of the work of the County Health Department differed from the usual annual reports of the medical officer in containing very few statistics and technicalities; it was "drawn up in response to a desire that the services which are available to the public should be more widely known, so that patients who require treatment under one or the other of the Council's schemes may receive it at the earliest possible stage." Copies were sent to all Medical Practitioners, Nurses, Head Teachers, Relieving Officers and others who might be interested, in all some 400 copies being issued.

INSPECTION AND SUPERVISION OF FOOD.

The Local Sanitary Authorities deal with the inspection of meat and other foods and reference should be made to the Annual Reports of the District Medical Officers of Health for the work carried out by them. Table V. summarises the work done under the Sale of Food and Drugs Acts, which together with certain other Acts and Regulations dealing with food is enforced by the County Council. 136 samples were examined by the Public Analyst of which for reasons explained in last year's report the great majority were milk samples; these numbered 126, 2 were samples of jam and 8 of butter. The 10 samples other than milk were all genuine. Of the 126 milk samples, 107 were genuine and 19 were not genuine. Proceedings were taken in all these 19 cases with the exeption of one, which was an informal sample, and in another case the summons was withdrawn owing to the sample bottle being broken. Six cases were dismissed, the defence in all these cases being that the milk was sold as it came from the cow, and in 11 cases fines were imposed which varied between £1 and 14/6 costs and £5 and 14/6 costs.

It seems desirable to point out that when a milk is found adulterated another sample from the same source is submitted to analysis and if this too falls below standard a third sample may be taken. Adulterated samples thus tend to be multiplied while the genuine samples are naturally not repeated. Making allowance for this, the Public Analysts' reports shew that of 108 first samples analysed 11

were not genuine, while subsequent samples from the same sources as these 11 adulterated samples accounted for the remaining 8 reported on as not genuine.

Twenty-two of the 126 samples contained a visible quantity of dirty debris in the 5—6 oz. sample. The production of clean milk is altogether a matter of care and attention to detail, and the public is keenly interested in cleanliness in milk and is prepared to pay for it when it is guaranteed as it is in graded milk. That the farmers also are alive to the importance of cleanliness is proved by their attendances at the clean milk demonstrations given under the Council's Agricultural Education Scheme. There can be little doubt that consumption of milk will increase with its cleanliness and it is agreed that a higher standard of health will result from an increased consumption of milk. Recent experimental work has emphasised the primary importance to children of an adequate daily ration of milk. Nothing is known which can take the place of milk in stimulating growth and development and the time would seem to be favourable now for some of our farmers to produce graded milk as so much attention is being directed to this subject.

TABLE V.—SHOWING THE NUMBER OF SAMPLES FROM EACH AREA SUBMITTED TO THE PUBLIC ANALYST FOR ANALYSIS DURING THE YEAR ENDING 31ST DECEMBER, 1927.

Parish.	New Milk.	Other Samples.	Total.	Remarks.
Bembridge ...	4 (3a)	–	4	Same Vendor two cases. Fined £1 and 14/6 costs, and £5 and 14/6 costs. One sample informal. No proceedings.
Binstead ...	3 (1a)	–	3	Summons withdrawn, bottle broken.
Brading ...	1 (1d)	–	1	
Brighstone ...	1 (1d)	–	1	
Carisbrooke ...	5 (2d) (1a)	–	5	Case dismissed.
Chale ...	1	–	1	
Cowes ...	6 (2d)	1	7	
East Cowes ...	7 (2d) (1d) (1a)	–	7	Case dismissed.
Freshwater ...	5 (1d) (2a)	1	6	One case dismissed, other fined £3 and 10/6 costs
Godshill ...	1	–	1	
Newport ...	13 (3d) (2a)	2	15	Same Vendor in all cases. Fined £1 and 14/6 costs each case.
Niton ...	1 (1d)	–	1	
Northwood ...	2	–	2	
Ryde ...	28 (6d)	4	32	
St. Helens ...	7 (1d) (3a)	–	7	Same Vendor in all cases. Fines £3, £5, £2 and 14/6 costs each case.
Sandown ...	8	–	8	
Shanklin ...	10 (1d) (2a)	1	11	Fines £2 and 14/6 in each case.
South Arreton ...	1	–	1	
Totland ...	3 (1d)	–	3	
Thorley ...	1	–	1	
Ventnor ...	10 (1d) (3a)	1	11	Two cases dismissed, other fined £5 including costs.
Whippingham ...	2	–	2	
Wroxall ...	4 (1a)	–	4	Dismissed.
Yarmouth ...	2	–	2	
	126 (22d) (19a)	10	136	

(a) Adulterated (d) Dirty.

MILK AND CREAM REGULATIONS, 1912 AND 1917.

The following particulars refer to the Administration of the Public Health, (Milk and Cream) Regulations, 1912 and 1917, during the year 1927:—

1.—Milk: and cream not sold as preserved cream:—

	Number of samples examined for the presence of preservatives—	Number in which preservatives were reported to be present—
Milk	126	0
Cream	0	0

2.—Cream sold as preserved cream:—None examined.

The provisions of the Tuberculosis Order of 1925 of the Ministry of Agriculture and Fisheries are carried out by the County Council. During the year 1826 animals were examined and reported upon by the appointed Veterinary Inspectors. These included 1788 cows in milk, 27 other cows or heifers, and 11 other bovine animals. In 22 cases in which examination was called for, the presence of tuberculosis was not confirmed by the Veterinary Surgeon. 120 animals were found to be suffering from tuberculosis, of which 7 were classed as tuberculosis of the udder, 85 were tuberculous emaciation, and 28 other forms of tuberculous disease.

In nearly all these cases the disease was in an advanced stage. It should be noted that this classification is based on the primary diagnosis and if the post-mortem findings are considered the results might be expressed differently; e.g., a number of the 85 cases of tuberculous emaciation suffered also from tuberculosis of the udder which is more common than the above classification might lead one to suppose.

PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASES.

TABLE VI.—NOTIFICATIONS MADE TO MEDICAL OFFICERS OF HEALTH DURING 1927.

	Isle of Wight Rural	Cowes	East Cowes	Newport	Ryde	St. Helens	Sandown	Shanklin	Ventnor	Totals	
Scarlet Fever	70	20	6	13	14	4	14	12	35	188	(159)
Diphtheria	16	12	—	2	3	—	2	1	1	37	(34)
Enteric Fever	1	2	—	1	1	1	1	—	—	7	(6)
Pneumonia	28	19	5	15	5	4	3	—	5	84	(34)
Puerperal Fever	1	—	—	—	—	—	—	—	—	1	(1)
Puerperal Pyrexia ...	3	—	2	4	1	—	1	—	—	11	(5)
Cerebro-Spinal Fever ...	1	—	1	2	—	—	—	—	—	4	(—)
Acute Poliomyelitis ...	1	—	—	—	—	—	—	—	—	1	(8)
Encephalitis Lethargica ...	—	1	—	1	1	—	1	—	—	4	(4)
Erysipelas	5	—	1	2	6	—	1	2	1	18	(16)
Ophthalmia Neonatorum	4	3	—	1	—	—	1	—	—	9	(3)
Pulmonary Tuberculosis	29	11	5	10	10	4	8	6	6	89	(82)
Other forms of Tuberculosis	9	8	6	8	7	—	—	1	—	39	(12)
Totals ...	168	76	26	59	48	13	32	22	48	492	(364)

Information regarding the non-notifiable infectious diseases is obtained from the schools Measles, chicken-pox and mumps were less prevalent in 1927, but influenza and whooping cough were increased. Influenza was prevalent particularly in the first quarter of the year and there were 75 deaths from this cause (27 in 1926) and 48 from pneumonia (39 in 1926). The pneumonia notifications numbered 84 (34 in 1926). Although there were no epidemics of notifiable diseases shewn in this table the total number of notifications increased from 364 to 492, the increase affecting all the sanitary districts with the exception of East Cowes and St. Helens.

Scarlet Fever notifications numbered 188 (159 in 1926) the principal increases being in Ventnor, Shanklin and the Rural District. There was 1 death but generally the disease was of the mild type that has characterised it in recent years.

There were 37 notifications of Diphtheria (34 in 1926) and of these 12 were in Cowes where there had been no case the previous year. 2 deaths were caused by Diphtheria, both in Cowes.

There were 7 notifications of the enteric group of fevers, 2 typhoid and 5 paratyphoid, and 1 death from typhoid.

Only 1 notification of puerperal fever was received (1 in 1926) and 11 notifications of puerperal pyrexia (5 in 1926) the increase in the latter condition being due to the fact that it was made notifiable only in October, 1926. It was foreseen that the tendency would be to notify fewer cases as "puerperal fever" and more as "pyrexia" which is a wide term covering all cases of high temperature whatever the cause. There were three deaths due to puerperal sepsis, the same number as in 1926.

Encephalitis Lethargica (sleepy sickness) notifications numbered 4 and there were 3 deaths (4 notifications and 4 deaths in 1926).

Nine infants were notified as suffering from ophthalmia neonatorum (3 in 1926). This is twice as many as our average and although 4 at least of these cases were severe, it is satisfactory to be able to report that in no case was there any permanent damage to the vision.

The results of treatment in cases of ophthalmia neonatorum were as follows :—

Year	Cases			Vision un-impaired	Vision impaired	Total blindness	Deaths
	Notified	Treated					
		At home	In hospital				
1927	9	9	–	9	–	–	–

The notifications of Tuberculosis numbered 128 as compared with 95 in 1926, and this increase was due mainly to the notifications from non-pulmonary disease which rose from 12 to 39.

Vaccination.— The Clerk to the Guardians has kindly supplied the figures in Table VII. shewing the vaccination returns in recent years. No vaccinations were performed by the Medical Officer of Health under the Public Health (Small-pox Prevention Regulations, 1917).

TABLE VII.

Year	1 Births	2 Vaccinated	3 Insusceptable	4 Dead	5 Conscientious Objection	6 Postponed	7 Removed	8 Unaccounted	Percentage not Vaccinated, i.e. Columns 5, 6, 7, and 8,
1923	1343	467	3	48	703	21	35	66	61.4
1924	1279	510	1	39	611	17	56	45	57.0
1925	1247	511	5	67	588	6	52	18	53.2
1926	1198	442	1	51	620	12	51	20	58.7
1927	1145	456	2	35	560	11	59	22	56.9

TUBERCULOSIS.

TABLE VIII.—SHOWING THE NUMBER OF NEW CASES AND THE DEATHS FROM TUBERCULOSIS DURING THE YEAR.

Age Periods	NEW CASES				DEATHS			
	Pulmonary		Non-Pumonary		Pumonary		Non-Pumonary	
	M	F	M	F	M	F	M	F
0–	—	—	—	—	—	—	—	—
1–	1	—	2	2	—	—	2	2
5–	2	2	5	1	—	—	3	—
10	3	1	4	2				
15	1	2	4	5	6	3	1	2
20	5	12	2	1				
25	12	18	4	4	7	11	3	2
35	9	11	2	1				
45	12	5	1	—	9	5	—	2
55	3	2	—	—				
65 and upwards	2	2	—	1	2	4	—	1
	50	55	24	17	24	23	9	9

146 patients suffering from Tuberculosis came to the notice of the Medical Officer of Health for the first time during 1927. Of these 128 were notified and 18 were not. In 7 of these the death returns gave the first information of the cases, 2 were transfers from other areas and the other 9 were heard of through the Ministry of Pensions or from Institutions to which they had been admitted. The total number of new cases thus shows an increase to 146 from the previous year's figure of 105.

Of these new cases 105 suffered from pulmonary disease (86 in 1926) and 41 from non-pulmonary disease (19). There were 47 deaths from pulmonary tuberculosis (67) and 18 from other forms of tuberculosis (13). The total deaths from tuberculosis show a reduction from 80 to 65 and perhaps therefore no great significance attaches to the increased number of notifications. 65 is the smallest number of deaths from tuberculosis of which we have record in any year. For the previous five years the average number of deaths from tuberculosis was 86; 72 from disease of the respiratory system and 14 from other forms. The number of deaths from the non-pulmonary forms of disease shews a slight increase this year but the total number of deaths from this cause is small and is bound to shew some variation from year to year.

In Cowes, East Cowes and Sandown all the deaths due to tuberculosis were of notified persons; in Newport 1, in the Rural District 4 and in St. Helens 2 persons died from tuberculosis who were not

previously notified. In Shanklin and Ventnor it is not stated in the Annual Health Reports whether any unnotified persons died from tuberculosis. There are some forms of tuberculosis which are rapidly fatal and diagnosis may be difficult, and when this is remembered it will be seen that notification is almost if not quite complete.

One tuberculous patient was employed in the milk trade and he was advised by the medical officer to give up this work, and this he has done, although up to the time of writing he has been unable to find other employment.

No patients were compulsorily removed to hospital.

TABLE IX IS A SUMMARY OF THE CHANGES IN THE TUBERCULOSIS REGISTER DURING THE YEAR.

Number of Patients	Pulmonary M	Pulmonary F	Non-Pulmonary M	Non-Pulmonary F	Total M	Total F
On Register at end of 1926	211	127	42	39	253	166
Added during 1927 (New Cases)	40	49	20	16	60	65
Cases removed from other areas	7	—	2	1	9	1
Old Cases re-admitted	3	3	—	—	3	3
Total	261	179	64	56	325	235
Removed to other areas during 1927 ...	24	27	6	5	30	32
Removed from the Register as being not tuberculous	31	17	8	10	39	27
Removed from the Register as "being cured"	40	15	9	3	49	18
Died during 1927	18	20	4	6	22	26
Number on Register at the end of 1927 ...	148	100	37	32	185	132

This table is a summary of the changes in the Tuberculosis Registers kept by the District Medical Officers of Health. These Registers are subject to constant revision in order to keep them up to date. During the year 62 patients removed to other areas; in nearly every case these patients had come to the Island temporarily for the benefit of their health and were returning home. 129 persons were removed from the Registers as being "non-tuberculous" or as being "cured" and all these cases were under careful observation for some time before such decision was arrived at, many of them in Longford Sanatorium. The total number of patients on the Registers at the end of the year was 317 which shows a substantial reduction from the 419 at the end of the year 1926 and 466 at the end of 1925.

The health visiting of tuberculous patients is carried out by the District Nurses in all districts. During the financial year ending 31st March, 1928 the Nurses paid 1175 visits, of which approximately one sixth were paid by the County Council Nurse. For the remaining five-sixths the Council makes a payment for the health visits and certain nursing visits at the rate of 1/- each, the total payment for the financial year amounting to £40 11s. The system of Health Visiting is of value in keeping the Tuberculosis Officer in close touch with the patient and with the home conditions and in bringing to his notice, without loss of time, any condition for which treatment is indicated.

The Council's tuberculosis scheme was described fully in the 1925 annual report and no alterations have been made in it since that report. Patients suffering or suspected to be suffering from tuberculosis are examined at the dispensary, behind the County Hall, Newport, without appointment, men on Tuesday mornings, and women and children on Saturdays from 9 o'clock. Patients are seen by appointment only at the Longford Dispensary and except for a few who are receiving pneumothorax treatment the dispensaries are used for purposes of diagnosis and supervision. Patients are visited at home when they cannot readily attend the dispensaries.

A dispensary register is kept which contains the names of those patients only who require public medical treatment or supervision and does not include patients whose means enable them to obtain privately any necessary treatment. The dispensary register therefore does not contain as many names as the tuberculosis register (see table IX.), but in any area with an efficient dispensary system the bulk of the notified cases will be seen by the tuberculosis officers and will there fore appear at some time on the dispensary register. At the end of 1927 there were 252 names on the dispensary register compared with 215 the previous year. Eight of these were under observation for the purpose of diagnosis and of the remaining 244, 187 were suffering from pulmonary tuberculosis and 57 from other forms of tuberculosis. 49 were children under 15 years of age and 195 were adults of whom 142 were insured persons. The number of new patients examined and other particulars of dispensary work are shewn in the following table.

TABLE X. SHOWS THE DISPENSARY WORK COMPARED WITH PREVIOUS YEARS.

Year	New Patients examined	Dispensary Attendances	Home Visits	Bacteriological Examinations		
				Sputum		Other Specimens.
				For Tuberculosis Officer	For Medical Practitioners	
1923	—	243	245	93	19	59
1924	155	242	292	143	60	14
1925	181	322	244	230	120	23
1926	138	379	195	135	89	45
1927	191	366	321	128	106	330

The number of bacteriological examinations made shews a substantial increase on the previous years and this is because the central laboratory at the County Hall was opened in February, 1927, and the examination was then undertaken, for the first time, of throat swabs for the presence of diphtheria bacilli and blood specimens for the Widal (typhoid) reaction. Of the sputum specimens, tubercle bacilli were found in 85, viz., in 68 of the 128 examined for the Tuberculosis Officer and in 17 of the 106 specimens examined for Medical Practitioners. Further details of the 564 specimens examined are as follows:—

Sputum for tubercle bacilli	234
Other fluids for tubercle bacilli	10
Swabs for diphtheria bacilli	272
Bloods for Widal reaction	11
Smears for gonococci	19
Hairs for ringworm	6
Other examinations	12
Total ...	564

A few sleeping shelters have been provided by the Council to enable patients to carry out open air treatment at home and these are of value particularly in cases where home conditions are crowded. The shelters have been on loan continuously, with the exception of one or two which have been in use at Longford Sanatorium, but the same difficulty has been experienced as in previous years in persuading patients to utilise them in the winter months. If patients can be induced to make further use of these shelters, both they and their families will benefit.

Extra nourishment in the form of milk was given to 15 patients during the financial year ending 31st March, 1928. At the beginning of the year 5 patients were receiving grants, 10 were added during the year and at the end of the year 3 were still in receipt of milk. The cost of this item was £30 2s. 6d. (£33 8s. 0d. in the previous year).

TABLE XI.—TOTAL NUMBER OF PATIENTS TREATED AT VARIOUS SANATORIA AND HOSPITALS DURING 1927.

Sanatorium or Hospital.	Resident at beginning of Year	Admitted during year	Discharged during year (inc. Deaths)	Remaing end of year	Total for the year
Longford Sanatorium	21	82	86	17	103
Royal National Hospital, Ventnor	1	2	3	—	3
Hermitage Sanatorium, Whitwell	4	—	4	—	4
Lord Mayor Treloar Hospital, Alton	3	—	1	2	3
Royal Sea-Bathing Hospital, Margate	3	3	2	4	6
Fairlee Infectious Diseases Hospital	—	1	1	—	1
Totals	32	88	97	23	120

Residential Treatment.—Of the 120 patients treated in Institutions during 1927, 103 were in the Council's Sanatorium at Longford, and 17 in other Hospitals or Sanatoria. Longford has not the facilities usually required for the treatment of tuberculosis of the bones and joints and arrangements are therefore made for patients suffering from these forms of the disease to be admitted to the Hospitals at Alton or Margate, and there were 6 such patients in these Hospitals at the end of the year. The 7

patients treated at Ventnor or Whitwell Sanatorium suffered from pulmonary tuberculosis and were admitted to these Hospitals either because the Longford beds were fully occupied at the time or for some special reason. There is no X-ray apparatus at Longford for example and it is of advantage therefore for patients to be admitted elsewhere if they require frequent X-ray examinations. Of the 26 beds available at Longford the average number in occupation was 20.4. (The previous year it was 18.6 and in 1925 it was 21.3).

The accommodation at Longford is adequate for our Island patients when it is supplemented by the use of a few beds elsewhere for such special cases as have been mentioned.

The numbers treated at Longford during 1927 were as follows:—

	Men	Women	Children	Total
In residence on December 31st, 1926 ...	6	9	6	21
Admitted during the year	15	37	30	82
Discharged during the year	15	33	33	81
Died during the year	2	3	—	5
In residence on December 31st, 1927 ...	4	10	3	17

The average duration of stay of the 81 patients discharged was 91.6 days. (84.2 in 1926 and 86.5 in 1925). Of these 81 patients 25 were admitted for purposes of observation, 3 adults and 22 children and 2 of the former (1 man and 1 woman) were found to be not tuberculous and 1 woman was tuberculous, while of the 22 children admitted on suspicion not one was diagnosed as definitely suffering from tuberculous disease, 21 were not tuberculous and one was doubtful. These children without exception benefited from their stay at the Sanatorium.

In the 57 tuberculous patients the immediate results of treatment were as follows:—

	Men	Women	Children	Total
Disease quiescent	—	3	3	6
Improved	13	25	8	46
No material improvement	1	3	1	5

As patients are admitted to Longford Sanatorium in all stages of the disease no useful purpose would be served in making a close statistical analysis of the immediate and after results of treatment such as is published by Institutions admitting only the favourable cases, but there can be no doubt that treatment, when it is commenced early enough to give the patient a chance, is as effective at Longford as anywhere.

The Matron at Longford acknowedges gifts from Miss Auld, British Red Cross Society, Mr. Brading, Mrs. Burton, Mr. Cleaver, Messrs. Burton's Stores, Mrs. Fleming, Mrs. Fletcher, Mrs. Gentle, Mrs. and Miss Hicks, Mr. Holmes, Mrs. Hughes, Messrs. Jordan and Stanley, Miss Lawes, Capt. Peter Macdonald. M.P., Councillor Midlane, Mrs. Minchin, Mr. Nobbs, Mr. Rayment, Dr. and Mrs. Robertson, Mrs. Rumsey, Mr. and Mrs. Ryall, Councillor B. Sanders, Mr. Smith, Mrs. Tilley, Mrs. Way, Mr. Wheeler, Mr. H. C. Winsor, Primary Department of the East Cowes Wesleyan Sunday School, and Officials and Staff at the Sanatorium and the County Hall.

Concerts which were much appreciated were given during 1927 by Messrs. Burton's Stores Concert Party and the Binstead Concert Party.

VENEREAL DISEASES.

No change has been made in the arrangements described in previous annual reports for dealing with cases of venereal disease. Patients are seen without appointment and without hospital letters of recommendation at the Royal County Hospital, Ryde, on Friday afternoons, women at 3 o'clock and men at 4 o'clock, or they can attend the branch treatment centre at the County Hall, Newport. The number of persons applying for the first time during 1927 for diagnosis or treatment was 96, of whom 35 were found to be suffering from venereal diseases. This is the same number of new patients as commenced treatment the previous year. Some of these patients were suffering from relapses of disease acquired years previously and of the freshly infected cases a number acquired the disease in other areas. Further experience at the treatment centres has tended to confirm the opinion expressed in previous annual reports that there is little venereal disease in the County.

TABLE XII.—RELATING TO ALL PERSONS WHO WERE TREATED AT THE TREATMENT CENTRE AT RYDE AND THE BRANCH TTEATMENT CENTRE AT NEWPORT DURING THE YEAR ENDED THE 31ST DECEMBER, 1927.

	Syphilis		Soft Chancre.		Gonorrhœa		Conditions other than Venereal		Total	
	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females
1. No. of persons who, on the 1st Jan., 1927, were under treatment or observation for	22	20	—	—	3	2	—	—	25	22
Old patients re-admitted during year	4	—	—	—	—	—	—	—	4	—
2. No. dealt with during the year in the out-patient Clinic *for the first time* and found to be suffering from—	12	11	—	—	6	6	33	28	51	45
Total—Items 1 and 2 ...	38	31	—	—	9	8	33	28	80	67
No. of these Transfers from other areas	3	3	-	—	2	—	—	—	5	3
3. No. of persons who ceased to attend the out-patient Clinic—										
(*a*) before completing the first course of treatment for .	—	2	—	—	—	1	—	—	—	3
(*b*) after one or more courses but before com pletion of treatment for	8	8	—	—	—	—	—	—	8	8
(*c*) after completion of treatment, but before final tests as to cure of	—	1	—	—	2	2	—	—	2	3
4. No. of persons transferred to other Treatment Centres after treatment for	2	1	—	—	2	1	—	—	4	2
5. No. of persons discharged from the out-patient Clinic after completion of treatmnt and observation for...	3	1	—	—	4	1	—	—	7	2
6. No. of persons who, on the 1st Jan., 1928, were under treatment or observation for	25	18	—	—	1	3	—	—	26	21
Total—Items 3, 4, 5, & 6 ...	38	31	—	—	9	8	—	—	47	39
7. Total attendances of all persons at the out patient Clinic who were suffering from	324	281	—	—	361	261	58	49	743	591
8. Aggregatae Nc. of "In-patient days" of treatment given to persons who were suffering from	—	—		—	—	—	—	—	—	—

	For detection of			For Wasserman Reaction
	Spirochetes	Gonococci	Other Organisms	
9. Examinations of Pathological material—				
(*a*) Specimens which were examined at, and by the Medical Officer of, the Treatment Centre	—	17	—	—
(*b*) Specimens from persons attending at the Treatment Centre which were sent for examination to an approved laboratory	—	9	—	128

A. No of persons from each area dealt with during the year at or in connection with the out-patient Clinic *for the first time* and found to be suffering from—

	Isle of Wight	Portsmouth	Bournemouth	Worthing	Total
Syphilis	21	1	1	—	23
Soft Chancre	—	—	—	—	—
Gonorrhœa	11	—	—	1	12
Conditions other than venereal ...	61	—	—	—	61
	93	1	1	1	96
B. Total No. of attendances at the out-patient Clinic of all patients residing in each area	1325	6	2	1	1334
C. Aggregate No. of "In-patient days" of all patients residing in each area ...	—	—	—	—	—
D. No. of doses of Salvarsan substitutes given	216	—	2	—	218
,, ,, Bismuth preparations ,,	298	—	—	—	298

MATERNITY AND CHILD WELFARE.

No change has been made in the Council's Maternity and Child Welfare scheme. As mentioned in last year's report there is now a midwifery service available in every part of the Island. Difficulty had been experienced in establishing midwives in one or two of the rural districts but these difficulties had been overcome and every district was covered as from the beginning of 1927. It is not because the rural districts do not appreciate the value of a resident midwife that there was hesitation in forming some of these nursing districts; on the contrary it is just in these isolated areas with no medical help at hand that a midwife's services are most appreciated. The difficulty has been the financial one, and though it will not be easy keeping up the service in some of these districts, it is worth an effort.

The arrangements for the admission of complicated midwifery cases to the maternity ward of Parkhurst Infirmary and of puerperal fever cases to the Isolation Hospital at Fairlee, have worked well. It was in April 1927 that these arrangements officially started and to the end of the financial year 1 patient was admitted to Fairlee and 5 to Parkhurst under the scheme. Of these last, 3 patients suffered from eclampsia (1 proved fatal), 1 from heart disease and 1 from hæmorrhage and miscarriage.

The antistreptococcic serum provided by the Council for use in cases of puerperal sepsis and kept in charge of the Matron at the Royal Isle of Wight County Hospital, Ryde was not used for any patient during the year. The vaccine kept at the County Hall for use in similar cases was utilised by medical practitioners for two patients.

Midwives.—Notification of intention to practise was received from 47 midwives of whom 34 practised here throughout the year and 6 for part of the year; 4 were engaged temporarily on the Island and 3 did not practise. 34 midwives were in regular practice and, of these 25 were employed by 19 various district nursing associations, 2 were in institutions, and 7 were in independent practice. These midwives are all qualified by examination and their inspection is carried out by the County Nursing Superintendent and when special circumstances arise, by the County Medical Officer. The number of inspections made during 1927 by the County Superintendent was 142, of which 118 were routine visits and 24 were special visits of enquiry.

In 1927 there were 1124 births registered in the Island, including 141 in Ryde, which is the only Local Authority having a maternity and child welfare scheme apart from the County Council. A midwife was present at 891 of these births, or 79 per cent; a doctor also was present at 179 so the number of births which the midwives attended alone was 712, or 63.3 per cent of the total. Medical help was summoned in 160 instances, i.e., in 22.5 per cent of the midwives cases (22.3 per cent. in 1926).

In addition to the notices of summoning medical help the midwives notified 6 still-births (0.8 per cent of their cases, 1 death of child, 1 death of mother, 8 artificial feeding, 9 performing last offices, 7 liability to be a source of infection, 1 septicæmia, 1 puerperal sepsis, 3 scarlet fever, and 2 puerperal pyrexia).

An analysis of the 160 cases in which medical help was summoned shews that 27 were for the child and 133 for the mother. Of these last 24 were for complications arising during pregnancy (10 for miscarriage or threatened miscarriage and 14 for other causes during pregnancy); 96 were for causes arising during labour (26 of these being for obstructed or delayed labour, 5 for hæmorrhage, 35 for ruptured perinum, and 30 for other causes during labour); and 13 were for causes arising after labour.

In all cases in which medical help is sought by a midwife the Council is liable for the payment of the doctor's fee, but is required to recover the fee from the patient except in necessitous cases. During the financial year ending 31st March, 1928, the Council paid the doctor's fee in 48 cases in which medical help was summoned by midwives, amounting to £76 10s. 0d. Of these 48 cases full liability was undertaken in 27; in 19 the patient was required to repay the fee, and in 2 part of the fee was repaid. The amount received during the year was £35 16s. 6d. of which £22 6s. 6d. was in respect of cases considered the previous year. The net expenditure of the Council under this heading has thus been £40 13s. 6d.

Table XIII shews the number of births attended by midwives compared with previous years and the proportion in which medical help was summoned and was paid for by the Council.

Year	Total Births	Number of Births		No. summoning medical help	No. in which medical fee was paid by Council	Amount paid by Council less repayments by patients
		Attended by midwives (Dr. also engaged in some)	Attended by midwives alone (No Dr. engaged)			
					*	*
1923	1278	925	744	114	30	£35 13 0
1924	1243	935	746	123	28	£22 0 6
1925	1200	865	713	168	53	£74 16 2
1926	1141	830	687	153	51	£57 9 0
1927	1124	891	712	160	48	£40 13 6

* The figures are those for the financial year ending 31st March.

The supervision of expectant mothers and the keeping of prescribed ante-natal records by midwives was made compulsory by the Central Midwives Board as from the beginning of 1927. In this County the midwives had been carrying out these duties for some three years previously so no difficulty was experienced in fulfilling the new requirements of the Board. The number of these visits made by the midwives who are also health visitors is shewn in the first two columns of Table XIV. Excluding from the totals the number of visits paid by the health visitor in Cowes and East Cowes, because these visits would be made to doctor's cases, it is seen that 2606 ante-natal visits were paid by the health visitors of which 653 were first visits. In addition the midwives who are not health visitors paid 1319 visits of which 274 were first visits. There was therefore a total of 3925 antenatal visits paid to 927 expectant mothers, i.e. to all the midwives' cases. On the average 4 visits were paid in each case.

Infant Welfare.—Excluding the 141 births in Ryde there were 983 births registered in the area administered for Maternity and Child Welfare purposes by the County Council. 922 of these were notified to the County Medical Officer through the District Medical Officers of Health i.e. 93.8 per cent. The number of infant deaths in this area was 49, or at the rate of 50 per 1000 births. If the figures for Ryde are included, the infant mortality rate for the Island is 45.4 which compares with 39.4 in 1926. This slight rise in the number of infants' deaths is fully accounted for by the greater prevalence of the commoner infectious diseases to which 11 deaths under 1 year were due (1 measles, 4 whooping cough and 6 influenza) as against one only the previous year (1 whooping cough). Congenital debility and malformation and premature birth, i.e., causes which were in operation before birth, acounted as usual for about half the infant deaths, viz., 24 of the 51.

No alterations have been made in the system of Health Visiting and the arrangements for carrying out these visits were described in the annual reports for 1925 and 1926. The number of visits paid to infants' homes under this heading is set out in the last three columns of Table XIV and from these it is evident that all the infants on the Island are adequately visited. The health visitors draw the medical officer's attention to any exceptional children for whom orthopoedic or other treatment is required, and suitable arrangements are made for their treatment. During 1927 no cases requiring orthopoedic treatment were referred to the Committee.

About 328 children on the average attend the various Infant Welfare Centres (See last Column of Table XV.) and these attendances are independent of and in addition to the nurses home visits already mentioned. The main function of these Centres is educational and they are much appreciated particularly by the younger mothers. Their management is entirely in the hands of local Committees of ladies who are interested in this work and to these ladies as also to those who manage the District Nursing Associations the public are greatly indebted. Without their interest and help much valuable public work could not be done and if these services had to be provided through the rates not only would the cost be increased, but personal and sympathetic associations would be lost.

The Council makes milk grants to necessitous cases attending the Infant Welfare Centres and the number of grants under this heading has shewn a steady increase. During the financial year ending 31st March, 1928, £58 18s. 2d. was expended for 447 weeks' supply of milk to 54 cases (The corresponding figures for 1926 were £53 18s. 2d. for 439 weeks' supply of milk to 60 cases and for 1925 £28 19s. 1d. for 251 weeks' supply of milk to 30 cases).

TABLE XIV.—SHOWING THE WORK OF THE HEALTH VISITORS IN 1927.

	To Expectant Mothers.		To Infants under 1.		Visits to Children aged 1-5
	First Visits	Total Visits	First Visits	Total Visits	
Arreton Nurse	22	118	26	139	89
Bembridge ,, ...	20	88	15	292	286
Brading ,, ...	21	138	23	126	127
Brighstone ,, ...	12	70	7	65	66
Calbourne ,, ...	10	81	26	147	109
Carisbrooke ,, ...	29	100	36	131	112
Chale ,, ...	11	53	9	132	107
Cowes, East Cowes (Nurse Blades)	38	82	185	1006	1403
Freshwater Nurse	59	221	59	336	213
Godshill ,, ...	17	82	39	240	238
Newport ,, ...	120	262	183	681	595
Niton ,, ...	12	43	7	68	57
Northwood ,, ...	19	107	37	190	293
Ryde District ,, ...	147	504	297	4276	2993
St. Helens ,, ...	12	64	11	60	120
Sandown ,, ...	35	166	75	392	303
Seaview ,, ...	10	50	79	184	129
Shanklin (Nurse Jones)	6	11	39	126	111
Ventnor Nurse	62	321	54	736	830
Wootton ,, ...	19	67	41	128	148
Yarmouth ,, ...	10	60	18	126	98
Total	691	2688	1266	9581	8427

TABLE XV.—SHOWING THE WORKING ARRANGEMENTS AT THE END OF THE YEAR OF THE VARIOUS INFANT WELFARE CENTRES.

District	Honorary Secretary	Nurse in Charge	Address of Centre	Days and Times of Meetings	M.O. and Time of Attendance	Approximate Average Attendance Children.*
Bembridge	Lady Thornycroft	Bennett, A.	Church Room	2nd Wednesdays, 3 p.m.	County M.O., Monthly	12
Brading	Miss Robinson	Taylor, F.	Ditto	2nd and 4th Tuesdays	County M.O., Monthly (4th Tuesday)	13 (1)
Carisbrooke	Mrs. Gentle	Taylor, D.	Church Hall	1st Tuesdays, 3 p.m.	County M.O., Monthly	10
East Cowes	Mrs. Jones	Blades E.	Ditto Adelaide Grove	1st and 3rd Tuesdays	County M.O., Monthly	12 (7)
West Cowes	Mrs. Churchman	Blades E.	St Mary's Hall, Mary Street	Wednesdays, 3 p m.	County M.O. Fortnightly (1st and 3rd Wed.)	27 (13)
Freshwater	Mrs. McMaster	Thompson E.	Parish Room	Alternate Thursdays, 2.30 p.m.	Dr. Mansfield, Fortnightly	30 (12)
Newport	Mrs. Tilley	Tomlin F.	Corn Exchange	Wednesdays, 2.30 p.m.	Dr. Dowdall, Weekly	34 (2)
Parkhurst Barracks	Mrs. Smith	Taylor, D.	Barracks	2nd & 4th Thursdays	Officer in Charge, R.A.M.C.	10 (3)
Ryde	Miss Corrie	Wyatt	Melville Street	Fridays, 3 p.m.	Dr. Edwards, Weekly	59 (14)
St. Helens	Mrs. Cockburn	Taylor, A.	The Institute	2nd Thursdays, 2.30–4 p.m.	Dr. Mussen, Monthly	10
Sandown	Miss Arnell	Dedman	Rechabite Hall	2nd & 4th Thursdays	County M.O., Monthly (4th Thursday)	37 (1)
Seaview	Mrs. Gordon	Allt, P.	Wesleyan School	1st Tuesdays, 3 p.m.	Dr. Aston, Monthly	12
Shanklin	Mrs. Whitaker	Jones, G.	St. Saviour's Hall	Alternate Tuesdays, 3 p.m.	Dr. Melhuish	22 (1)
Ventnor	Miss Davies, A.R.C.	Stoodley and Meikleham	Church Hall, Alpine Road	2nd & 4th Thursdays	County M.O., Monthly (4th Thursday)	40 (2)

* The figures in brackets show the average attendance of expectant mothers.

COUNTY NURSING ASSOCIATION.

Since 1917 when it was formed, the County Nursing Association in addition to supervising its affiliated district Associations, has trained nurse midwives for service in the County and in respect of the midwifery part of this service it has received grants from the Council from time to time. There are now 18 district Nursing Associations and one Maternity and Infant Welfare Association affiliated to the County Association. These employ 30 nurses and the annual number of vacancies arising from resignations and removals amounts to about 12. Not all of these are replaced by County trained nurse midwives. On the contrary the bulk of the district nurses are trained otherwise. either in hospital or occasionally one who has been trained by another County has come here.

Although there is a midwifery service available in every part of the Island, the parish of Newchurch is not served by a district nurse and the County Nursing Association which has been responsible for establishing so many of the nursing districts has this matter now under consideration.

Table XVI summarises some of the work done in the various affiliated districts in the year ending 31st March, 1928.

TABLE XVI.

Nursing Associations.	Medical Cases	Surgical Cases	Total	Midwifery Cases	Maternity Cases	Total
Arreton Gatcombe, Chillerton, Blackwater, Rookley, Merstone, and Godshill ...	19	4	23	17	6	23
Bembridge	59	9	68	8	9	17
Brading	42	44	86	8	7	15
Brighstone, Brook, and Mottistone ...	36	38	74	10	3	13
Calbourne, Shalfleet, Porchfield, Newtown, Ningwood, and Hamstead ...	22	16	38	7	5	12
Carisbrooke	88	18	106	17	9	26
Chale, Kingston, and Shorwell	28	22	50	5	4	9
Freshwater and Totland	101	102	203	8	16	24
Godshill and Wroxall	60	25	85	15	3	18
Newport	291	201	492	99	20	119
Niton, Whitwell, and St. Lawrence ...	19	25	44	8	5	13
Northwood and Gurnard	42	29	71	12	4	16
Ryde	693	193	886	107	38	145
St. Helens	42	16	58	9	4	13
Sandown	16	11	27	27	11	38
Seaview and Nettlestone	53	19	72	6	1	7
Ventnor	113	45	158	27	37	64
Wootton Bridge and District	60	32	92	8	3	11
Yarmouth, Thorley, Ningwood, and Wellow	51	35	86	11	4	15
Totals	1835	884	2719	409	189	598

TABLE XVII—HOUSING STATISTICS FOR 1927

	Rural Districts	Cowes	East Cowes	Newport	Ryde	St. Helens	Sandown	Shanklin	Ventnor
No. of new houses erected during the year— Total	125	34	8	64	11	78	45	28	11
With State assistance under the Housing Acts—									
(i) By the Local Authority	15	20	0	46	0	52	4	*	6
(ii) By other bodies or persons	77	6	7	18	10	17	36		3
Inspection—									
Total No. of dwelling houses inspected for housing defects (under the Public Health or Housing Acts)... ...	0	251	298	478	139	86	165	100	215
No. of dwelling houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910, or the Housing Consolidated Regs.'s' 1925 ...	1038		78	125	102	32	0	150	62
No. of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	19	20	0	8	0	0	11	0	6
No. of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation ...	332	32	28	117	82	78	132	2	0
Remedy of Defects without service of Formal Notices—									
No. of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	351	28	13	90	62	37	64	30	0
Proceedings under Section 3 of the Housing Act, 1925—									
No. of dwelling-houses in respect of which notices were served requiring repairs	10	1	5	8	9	0	0	2	43
No. of dwelling-houses which were rendered fit—									
(a) By owners	26	0	5	4	8	0	0	2	43
(b) By Local Authority in default of owners ...	0	0	0	2	1	0	0	0	0
No. of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intentions to close	1	0	0	0	0	0	0	0	*
Proceedings under Public Health Acts—									
No. of dwelling-houses in respect of which notices were served requiring defects to be remedied	0	0	0	2	2	41	132	0	*
No. of dwelling-houses in which defects were remedied—									
(a) By owners	0	0	0	0	2	32	31	0	
(b) By Local Authority in default of owners ...	0	0	0	2	0	0	0	0	*
Proceedings under Sections 11, 14 and 15 of the Housing Act, 1925—									
No. of representations made with a view to the making of Closing Orders	13	20	0	8	0	0	11	0	*
No. of dwelling-houses in respect of which closing Orders were made	11	20	0	8	0	0	5	0	*
No. of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit	2	0	9	0	0	0	0	0	3
No. of dwelling-houses in respect of which Demolition Orders were made	0	0	0	2	0	3	0	0	*
No. of dwelling-houses demolished in pursuance of Demolition Orders	0	3	0	2	0	3	0	0	*
Houses demolished volutarily	3	0	0	0	0	0	*	0	*

*In these cases incomplete or no information has been given in the reports to enable the particulars to be tabulated.

404 Houses were erected in the Island in 1927 as compared with 368 in 1926, 279 in 1925 and 186 in 1924.

METEOROLOGY.

To Mr. John Dover, M.A., of the Totland Meteorogical Station, Major C. G. Brodie, of Wootton, and Mr. C. Orchard, of Sandown, I am indebted for the figures in Table XVIII.

Month	Maximum Temperatures			Minimun Temperatures			Mean Temperature			Rainfall in Inches			Hours of Sunshine.		
	Totland	Wootton	Sandown	Totland	Wootton	Sandown	Totland	Wootton	Sandown	Totland	Wootton	Sandown	Totland	Wootton	Sandown
January ..	50.4	56.0	54.0	26.1	22.0	21.0	42.6	41.3	41.7	2.19	2.78	2.70	65.6	--	66.0
February ...	53.7	53.0	52.0	25.9	23.0	25.0	40.5	40.3	40.7	3.46	4.56	4.28	61.1	--	50.6
March ...	57.1	60.0	56.0	32.1	30.0	29.0	46.0	45.3	45.7	2.52	3.08	3.18	155.8	--	161.0
April ...	60.2	63.0	63.0	31.6	30.0	29.0	47.7	47.6	48.1	1.67	2.07	1.85	197.4	--	194.8
May ...	74.4	74.0	72.0	35.8	34.0	29.0	54.3	54.2	53.9	0.87	.55	0.62	258.9	--	263.6
June ...	69.0	75.0	70.0	43.0	40.0	39.0	56.4	55.8	56.1	2.15	2.34	2.85	227.1	--	238.4
July ...	79.4	81.0	78.0	47.5	33.0	45.0	60.5	62.5	60.9	2.90	3.13	3.35	124.6	--	148.1
August ...	73.4	75.0	74.0	49.2	46.0	45.0	60.8	60.1	61.5	3.19	3.92	2.73	195.1	--	220.8
September ...	71.4	72.0	71.0	39.3	39.0	38.0	57.2	56.3	57 4	5.94	7.31	6.88	121.5	--	134.0
October ...	64.8	64.0	65.0	38.9	35.0	33.0	53.1	52.6	52.7	1.67	2.33	2.11	124.3	--	118.5
November ...	59.9	63.0	61.0	30.9	27.0	29.0	45.7	42.7	45.3	3.75	3 27	3.23	67.6	--	67.2
December ...	52.8	53.0	52.0	24.0	24.0	27.0	38.7	36.8	39.9	4.26	4.15	3.54	27.8	--	26.0
The year 1927	79.4	81.0	78.0	24.0	22.0	21.0	50.3	49.6	50.3	34 54	38.59	37.32	1626.8	--	1689.0

1927 was again a wet year, September being the wettest month; the excess of rain was very evident also in June, July and August, and as there was a deficiency of sunshine in these months, the summer was ruined. May was a fine month, with little rain and a good deal of sunshine. October also was a very dry month, having less rain than any other month except May; and in October the amount of bright sunshine was above the average.

Mr. Dover remarks that he has never known so little sunshine in any previous July and December, and throughout the year sunshine was decidedly lacking. Some places had a record rainfall in 1927, but this was not the case at Totland; Mr. Dover describes it as rather a wet year and states he has known seven years with a higher rainfall.

ULTRA VIOLET RAYS.

Dr. R. T. Cooke, Medical Officer of Health of Ventnor, again remarks in the annual report on the favourable position occupied by Ventnor in the amount of sunshine and ultra-violet rays she enjoys compared with other towns in which records are taken. He quotes figures in support of this, and in summarising he points out that "the daily mean of bright sunshine was 4.58 or 38 per cent of the total possible, and of ultra-violet rays the daily mean was 3.28. Considering the bad summer we had last year this is a very high percentage, and compares very favourably with other health resorts. When one realises the health giving properties of sunshine and ultra-violet rays, these figures should be a very valuable asset to Ventnor."